**TRANSMITTAL FORM**

Application Number	09/932,426	<b>RECEIVED</b>
Filing Date	August 17, 2001	<b>OCT 01 2003</b>
First Named Inventor	Sandberg	<b>GROUP 1700</b>
Art Unit	1724 /	
Examiner Name	Jason M. Greene	
Attorney Docket Number	202850-0043	

**ENCLOSURES (check all that apply)**

- ☒ Amendment/Reply  
☐ Before Final  
☒ After Final  
☐ Affidavits/Declarations  
☐ Information Disclosure Statement  
☐ PTO-1449 Form(s)  
☐ Cited References  
☐ Certified Copy of Priority Document  
☐ Response to Missing Parts/Incomplete Application  
☐ Terminal Disclaimer  
☐ Status Letter

**PETITION FOR EXTENSION OF TIME**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

- ☒ Applicant(s) claims small entity status under 37 CFR 1.27.  
☐ Applicant(s) petitions for a one-month extension of time and pay the fee of \$110.00 (37 CFR 1.17(a)(1)-(5)).  
☒ Applicant(s) believes that no petition for an extension of time is necessary (37 CFR 1.36(c)); however, applicant(s) hereby petition for sufficient extension of time to render the present submission timely.

**CLAIMS FEES**

- ☒ No additional claim fee is required.

					Small Entity		Large Entity	
	Claims Remaining After Amendment		Highest Number Previously Paid For	Extra Claims Present	Rate	Addit. Claim Fee	Rate	Addit. Claim Fee
Total	27	-	32	=0	x 9=	\$0	x 18=	\$
Independent	3	-	3	=0	x 42=	\$0	x 84=	\$
<input type="checkbox"/> First Presentation of Multiple Claim					+ 140=	\$0	+ 280=	\$

**ENCLOSED FEES**

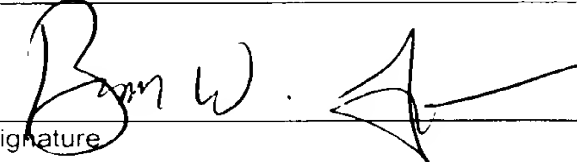
<input type="checkbox"/> Additional Claim Fee	\$
<input type="checkbox"/> Extension fee for one-month	\$110.00
<input type="checkbox"/> Information Disclosure Statement	\$180.00
<input type="checkbox"/> Surcharge for Missing Parts - Declaration	\$130.00
<input type="checkbox"/> Terminal Disclaimer	\$110.00
<b>TOTAL FEES ENCLOSED</b>	<b>\$0</b>

**PAYMENT OF FEES**

- ☐ A check in the amount of \$ is enclosed.  
☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1965.  
☐ The Director is authorized to charge Deposit Account Number 50-1965 in the amount of \$

**SIGNATURE OF ATTORNEY**

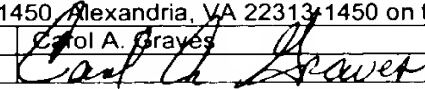
Barry W. Sufrin, Reg. No. 27,398  
MICHAEL BEST & FRIEDRICH, LLC  
401 North Michigan Avenue  
Suite 1900  
Chicago, Illinois 60611  
Telephone: (312) 222-0800  
Facsimile: (312) 222-0818

  
Signature  
Date: September 25, 2003

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is:

- ☐ being facsimile transmitted to the USPTO, facsimile number  
☒ deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below

Typed or printed name: Carol A. Graves  
Signature:   
Date: September 25, 2003



RESPONSE UNDER 37 CFR 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP 1724

Attorney Docket No. 202850-0043

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Appln. of SANDBERG

Application No. 09/932,426

Filed: August 17, 2001

For: "EQUIPMENT AIR FILTER"

Art Unit: 1724

Examiner: Jason M. Greene

Confirmation No. 4307

I, Carol A. Graves, hereby certify that this correspondence is being deposited with the US Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date of my signature.

*Carol A. Graves*  
Signature

*SEPT 25, 2003*  
Date of Signature

RESPONSE TO AUGUST 6, 2003 FINAL OFFICE ACTION

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

RECEIVED  
OCT 01 2003  
GROUP 1700

Sir:

In response to the Office Action of August 6, 2003, please amend this application as follows.